

### LOS ANGELES COUNTY FIRE DEPARTMENT

HEALTH HAZARDOUS MATERIALS DIVISION 5825 Rickenbacker Road, Commerce, CA 90040



#### **BUSINESS PLAN ANNUAL RENEWAL CERTIFICATION**

Hazardous I certify that the attached HMIS refle accordance with the following condit	<u> </u>	naterials for the reporting year in
_ no longer used.		sed hazardous materials that are
Revise: Write the correct amour accuracy of any previously repor	ted hazardous materials.	
material type and quantity identif Hazardous Substances and The	ied on 40 CFR Part 355, Appen	•
	Materials Inventory—Chemic	al Description Form to add each
No Change: Hazardous Mater     ■	•	·
Cons An initial submittal of the CCP is req every 3 years after the initial submit your agency is accurate and current	tal, the CCP needs to be review	azardous materials. At least once ed and certified that the file with
☐ If the Owner/Operator page inconew CCP.	dicates "CCP Certification req	uired" complete and submit a
Modification: Significant change CCP. Complete and submit cha out old information, and writing in Lost: Complete and submit any No Change: Their have not been operations that require a revision	nges of your CCP with this form n the correct information. parts of your CCP that were lost n any significant changes in the	or damaged. Received facility's personnel and
	Cal-ARP Program	HHMD - Data Ops
I reviewed the threshold quantities in and certify that any regulated substa- requirement:		e California Code of Regulations
☐ Add: Complete the Cal-ARP Progregulated substance is at or about No Change: The previously substance	ve the threshold quantity (TQ).	Submit one form per chemical.
	ANNUAL CERTIFICATION	
I certify that the information submitted herein is requirements of Chapter 6.95 of the Health and annual inventory form.		
Yuri E. Strauss Print Name of Document Preparer  Pr	TRANCINE H. Pyppy int Name of Owner/Operato()	Dranune W. Rypy Signature of Owner/Operator
Fred R. Rippy, INC 12 Business Name Si	471 E. Washington Blud.	1/15/09 Date
FA0029134 028	Submit this packet to the above	address before January 3, 2009 to
FRED R RIPPY INC	avoid a late submittal penalty of Certified Mail advised. Do not su	\$285 or other enforcement options.
12471 E WASHINGTON BLVD	Obtain unified program forms from	our website at
( )	http://www.fire.lacounty.gov/Health from our Data Operations Unit at (3	

Date run : 11/18/2008 11:15:23AM Run by

## Los Angeles County Fire Department

Owner/Operator Identification

Beginning Date: 1/1/2008 Ending Date: 12/31/2008

Report #5314 V081007

FA0029134

Please clearly make changes/corrections.

On Site Regulated Substances: Yes

Owner ID:	OW0029134			
Owner Name:	FRANCINE H RIPPY	Dvr Lic No:	State:	
Owner DBA:	FRED R RIPPY INC	Tax ID : Exemption 6: F	Privacy	
Owner Address:	12471 E WASHINGTON BLVD	Owner Date of Birth:	10/17/1938	
	WHITTIER, CA 90602			
Work/Business Phone:	562-698-9801			
Billing/Mailing Address:	12471 E WASHINGTON BLVD			

WHITTIER, CA 90602 ATTN/Care of: CAROL CASTILLO

FACILITY FILE INFORM	ATION
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FA0029134 Facility ID:

**Facility Name:** FRED R RIPPY INC

12471 E WASHINGTON BLVD Site Location:

WHITTIER, CA 90602

Phone: 562-698-9801

12471 E WASHINGTON BLVD Mailing Address:

WHITTIER, CA 90602

Operator/Care of: FRANCINE H. RIPPY E-Mail Address:

Nature of Business: MANUFACTURING SIC Code: 3469

**Operating Hours:** Days: M-F Hours: 6:30-3:00

Station:

**Date First Became Operational:** 

#### **ENVIRONMENTAL CONTACT INFORMATION**

FRANCINE RIPPY Contact Name:

12471 E WASHINGTON BLVD

WHITTIER

CA 90602

00-827-7394 Dun & Bradst.:

**EMERGENCY CONTACT INFORMATION** 

ASSESSORS PARCEL NUMBER

PRIMARY CONTACT:

SECONDARY CONTACT:

Phone: 562-698-9801

Received

JAN 2 0 2009

HHMD - Data Ops FRANCINE RIPPY FRANCINE RIPPY Name: Title: OWNER OWNER Business Phone: 562-698-9801 562-698-9801 **Exemption 6: Privacy** 24 - Hour Phone:

Pager#: Not Specified Not Specified

ADDITIONAL INFORMATION

H 25-Jan-08

Certification: I certify under penalty of law that I have personally examined and am familiar with the information submitted in this inventory and

believe the information is true, accurate and complete. Print Name of Document Preparer

uri E. Strauss

Signature of Owner/Operator:

# **Hazardous Materials Inventory Statement**

Report,#5316 Run By:

11/18/2008 Date:

Business Name: FRED R RIPPY INC
(Same as Facility Name or DBA) 12471 E WASHINGTON BLVD

WHITTIER

Page 1 of 1

Chemical Location: Unit # 2 (Building/Storage Area) FIXED CONTA	AINERS AT SITE					Facility	y ID#:	FA0029134	6
1. 2. 3.  Haz. Grid Class Coordinate Common Name Sec		EHS CAS#	7Type and Physical State:		6. antities Average Daily	Largest Cont	7. Units	8. Storage Codes Storage Storage Pressure Temp.	9. Hazard Categories
SAF WAY LUBE	SOLYENT-REFINED LIGHT NAPHTHENIC DISTILLATE	64741-97-5	M	55	30	55.00	Α	A A	Y fire
Sub- Location BACK OF SHOP NW CRNR  CRA, sign:  Hi6026292 RS: N CAS #	MINERAL CIL	8012-95-1 L: Liqu	M: Mix P: Pure W: Waste  L  nid S: Solid G: Gas	<u>Curies:</u> (If radioactive)	Days On	Storage Container.*	A: Gallons B: Cu Feet C: Pounds D: Tons Waste	A: Ambient B: ≥ Ambient C: ≤ Ambient D: Cryrogenic  Amt: 15.0	reactive presure rels. acute health chronic heal. radioactive
PROPANE			Р				Code: 221		Y fire
	77	N T	M: Mix P Pure	1,192	600	340.00	B A: Gallons	B A A: Ambient B: ≥ Ambient C: ≤ Ambient	reactive presure rels. acute health chronic heal. radioactive
Sub - Location NE CRNR OF WHSE	Components Not	<u> </u>	W: Waste	Curies:	Days On	Storage	B: Cu Feet C: Pounds		
If EPCRA, sign:	for Pure Che	emical	<b>G</b> nid S: Solid G: Gas	(If radioactive)		Container.*	D: Tons	D: Cryrogenic	
HZ6085746 RS: N CAS # 74-98-6		L. Eiqi	ild S. Sond G. Gas		365	L 	Waste Code:	Amt:	
ACCUSTAMP VANISHING OIL  Sub -	NAPHTRA: STODDAAD SOLYENT SOLYENT-REFINED LIGHT NAPHTHENIC OBSTILLATE HINERAL OIL	8052-41-3 64741-97-5 8012-95-1	M: Mix P: Pure W: Waste L aid S: Solid G: Gas	Curies: (If radioactive)	Days On Site: 365	Storage Container.  D	A: Gallons B: Cu. Feet C: Pounds D: Tons Waste Code:	A A A: Ambient B: > Ambient C: < Ambient D: Cryrogenic Amt:	Y fire reactive presure rels. acute health chronic heal. radioactive
OXYGEN			Р	308	154	154.00	В	в А	Y fire
b - SW CRNR OF WHSE	Components Not	Necessary	M: Mix P: Pure W: Waste				A: Gallons B: Cu. Feet C: Pounds	t B: > Ambient	Y presure rels. acute health
If EPCRA, sign:	for Pure Che		G	<u>Curies:</u> (If radioactive)	Days On Site:	Storage Container.*			
H20026291 RS: N CAS# 7782-44-7		L: Liqu	nd S: Solid G: Gas		365	5 L Wast	Waste	Amt:	chronic heal. radioactive
ACETYLENE		1	P				Code:	В А	Y fire
Sub - Location SW CRNR OF WHSE	Components Not .	Vecessarv	M: Mix P: Pure W: Waste	290 	145 Days On	145.00 	A: Gallons B: Cu Feet	A: Ambient B: ≥ Ambient	Y reactive Y presure rels.
If EPCRA, sign :	for Pure Che		L	(If radioactive)	Site:	Container.	C: Pounds D: Tons	C: < Ambieni D: Cryrogenic	acute health
HI0026294 RS: N CAS# 74-86-2			iid S Solid G: Gas		365 L	L	Waste Code:	Amt:	chronic heal. radioactive
		Code Storage Type	Code Storage Ty		e Storag			· · · · · · · · · · · · · · · · · · ·	
	l Drum G Carboy  Non-metallic Drum H Silo	J Bag K Box	M Glass Bottle N Plastic Bottle	•	Tank W Rail Ca	•			
C Tank Inside Building F Can	I Fiber Drum	L Cylinder	O Tote Bin	• •	Other			<del></del>	